



Docket No.: DEXCOM.8DVCP2

Customer No.: 20,995

AMENDMENT / RESPONSE TRANSMITTAL

Applicant : Shults, et al.
App. No. : 09/916858
Filed : July 27, 2001
For : DEVICE AND METHOD FOR
DETERMINING ANALYTE
LEVELS
Examiner : Nasser, R.
Art Unit : 3736

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

October 8, 2004

(Date)

Rose M. Thiessen, Reg. No. 40,202

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

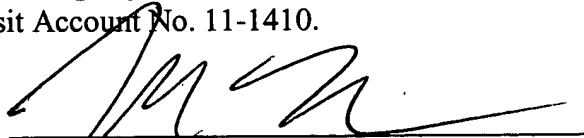
Transmitted herewith for filing in the above-identified application are the following enclosures:

- (X) Amendment in 8 pages.
- (X) Terminal Disclaimer in 2 pages.
- (X) Terminal Disclaimer in 2 pages.
- (X) Establishment of Right of Assignee to Take Action and Revocation of Power of Attorney in 2 pages.
- (X) The present application qualifies for small entity status under 37 C.F.R. § 1.27.

The fee has been calculated as shown below:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
Total Claims	37 - 43 = 0	2202 (\$9)	0 x 0 =	\$0
Independent Claims	2 - 3 = 0	2201 (\$44)	0 x 0 =	\$0
Multiple Claim		2203 (\$150)		\$0
1 Month Extension		2251 (\$55)		\$0
2 Month Extension		2252 (\$215)		\$0
3 Month Extension		2253 (\$490)		\$0
Terminal Disclaimer		2814 (\$55)	2 x 55 =	\$110
			TOTAL FEE DUE	\$110

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- (X) A check in the amount of \$110 is enclosed.
 - (X) Return prepaid postcard.
 - (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.



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